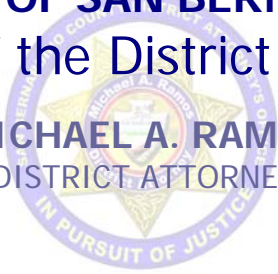


COUNTY OF SAN BERNARDINO
Office of the District Attorney

MICHAEL A. RAMOS
DISTRICT ATTORNEY



APPLICATION PACKAGE

VICTIM SERVICES VOLUNTEER / STUDENT INTERN PROGRAM

If you are interested in becoming a Victim Services Volunteer / Student Intern at the San Bernardino County District Attorney's Office, please complete this application and mail the original back to:

San Bernardino County District's Attorney's Office
303 West Third Street, 5th Floor
San Bernardino, CA 92415-0502

Attn: Bureau of Victim Services
Robin Berliner

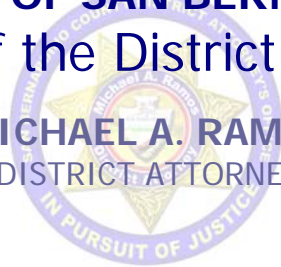
All applicants are subject to a criminal background check.

Please allow at least 4 weeks for processing of the application. If you have any questions, you may e-mail the Bureau of Victim Services:

rberliner@da.sbcounty.gov

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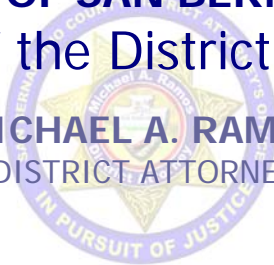


VICTIM SERVICES APPLICATION

Date: _____	
Name: _____	
Address: _____	
Home Phone: () -	Cell Phone: () -
EDUCATION:	
<input type="checkbox"/> High School <input type="checkbox"/> Junior College <input type="checkbox"/> College <input type="checkbox"/> Graduate School	
<input type="checkbox"/> Other: _____	
Last School Attended: _____	
Degree(s) Obtained: _____	
Do you have any special training/education in dealing with victims or witnesses of crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, explain: _____	
LANGUAGE:	
Do you speak any languages other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, what language(s)?: _____	
EXPERIENCE:	
Have you worked with victims or witnesses of crime before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, explain the position you had and your duties: _____	
Have you worked with children and/or elderly persons before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, explain the position you had and your duties: _____	
What kind of volunteer work are you interested in? _____	
Would you be interested in interacting with victims and/or witnesses? <input type="checkbox"/> Yes <input type="checkbox"/> No	
AVAILABILITY	
Dates available Start date: _____ End date: _____	
Days of the week available: _____ Hours available: _____	
Which office(s) are you willing to volunteer at:	
<input type="checkbox"/> Barstow <input type="checkbox"/> Chino <input type="checkbox"/> Fontana <input type="checkbox"/> Morongo	
<input type="checkbox"/> Rancho Cucamonga <input type="checkbox"/> San Bernardino <input type="checkbox"/> Victorville	
Due to the sensitive nature of the work in the District Attorney's Office, a background check will be required. Do you have any objection? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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FINAL STATUS

☐ **Approved**
☐ **Denied**

By: _____

Date: _____

SEND RESULTS TO:

Phone#: _____

AUTHORITY TO RELEASE PERSONAL INFORMATION

I fully recognize that the San Bernardino County District Attorney's Office (SBDA) will inquire into all areas of my background, which may affect my suitability to be employed by a law enforcement agency. I hereby authorize SBDA to investigate my past record and to obtain any and all information concerning my record or character from present and past employers, personal references, and all persons from whom SBDA determines to have relevant information. Moreover, I hereby exonerate, release and discharge such persons or entities, its officers, agents and assigns, from any liability or damages, whether in law or in equity, now and in the future, for furnishing the information requested by SBDA.

NAME: _____
Last First Middle

MAIDEN OR PRIOR NAMES: _____

HOME ADDRESS: _____
No. Street Apt. #
City State Zip

TIME AT THIS ADDRESS: _____ years _____ months

HOME TELEPHONE NUMBER () - _____

SOCIAL SECURITY NUMBER: _____

DRIVERS LICENSE NUMBER & EXPIRATION: _____ **STATE** _____

DATE OF BIRTH: ____ / ____ / ____ **BIRTHPLACE:** _____
Mo. Day Yr. City State

POSITION APPLYING FOR: _____

CURRENT EMPLOYER: _____
ADDRESS: _____
IMMEDIATE SUPERVISOR: _____
DATE OF EMPLOYMENT: _____ PHONE: () - Ext. _____

PAST EMPLOYER: _____
ADDRESS: _____
IMMEDIATE SUPERVISOR: _____
DATE OF EMPLOYMENT: _____ PHONE: () - Ext. _____

Have you ever been arrested or convicted of any criminal offense? ☐ Yes ☐ No
If yes, list offense, date and court of jurisdiction.

Please list all previous addresses you've had for the last ten years.

Date From / Date To	Street	City	County	State

I certify that all statements made in this application are true and complete to the best of my knowledge. I understand that any false statement of material facts will subject me to disqualification or dismissal. I also understand that my work with the District Attorney's Office is contingent upon successful completion of this background investigation. I further understand that I will not be provided, nor am I entitled to an original or a copy of the background information provided as a part of this background investigation.

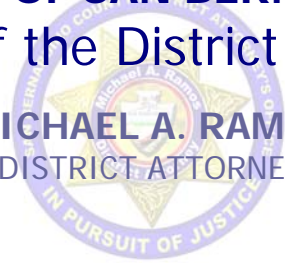
Signature: _____ Date: _____
Witness: _____ Date: _____

INVESTIGATION RESULTS

CNI	DMV	CII

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VOLUNTEER / STUDENT INTERN AGREEMENT

1. I understand that I will not be paid for providing services as a volunteer/student intern.
2. I agree not to divulge any information obtained in the course of volunteer/student intern work to unauthorized persons. I understand unauthorized release of confidential information may make me subject to a civil action under the provisions of the Welfare and Institutions Code.
3. If I am injured while performing as a volunteer/student intern, I must immediately report the injury to my supervisor.
4. I understand as a volunteer/student intern I will be covered through the County's self-insurance program for public liability losses while performing volunteer work.
5. I understand as a volunteer/student intern I shall be deemed an employee of the County for Worker's Compensation purposes only while performing volunteer work, unless I am an unpaid student intern from an accredited college or university.
6. I understand that I must have a valid California Driver's License and carry the State's minimum vehicle liability and property damage insurance for my personal vehicle if my volunteer/student intern services involve travel on County business.
7. I agree to follow all County policies and practices regarding conduct and ethics, which apply to County employees.
8. I understand I am an at-will volunteer/student intern and my services may be terminated at any time without cause and without right to appeal.

I have read this agreement. I understand and agree to abide by all terms listed above.

Volunteer/Student Intern Name (Print)

Date

Volunteer/Student Intern Name (Signature)

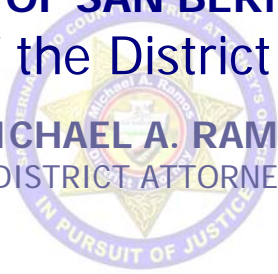
Volunteer/Student Intern Coordinator Name (Print and Sign)

Date

COUNTY OF SAN BERNARDINO

Office of the District Attorney

MICHAEL A. RAMOS
DISTRICT ATTORNEY



CONFIDENTIALITY & WORK ETHICS AGREEMENT

The District Attorney's Office is responsible for the prosecution of criminal cases. Like the permanent San Bernardino County District Attorney staff, as a volunteer worker, you have an obligation to the public we serve to maintain the highest ethical standards in both personal and official conduct.

CONFIDENTIAL INFORMATION:

During your assignment as a volunteer, you may become privy to sensitive and/or confidential information. Remember that official business of the District Attorney's Office is confidential. Do not discuss or give official information to anyone other than those persons for whom the material is intended as directed by your supervisor or as required by law. Disclosure of certain sensitive and/or confidential information may subject you to liability and/or prosecution.

IDENTIFICATION:

You will be issued an identification card that will authorize you to enter the District Attorney's Office facilities. You will be held personally responsible for this identification. Please report if it is lost, immediately to your supervisor. Misuse of official identification is a violation of the law.

SAFETY POLICY:

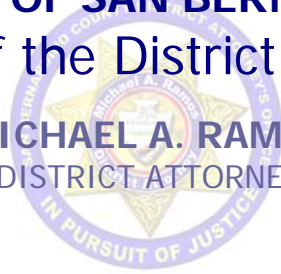
The District Attorney's Office regards the personnel of this office as its most valuable asset. The reduction of on-the-job injuries and damage to county property is an essential part of an efficient operation. The practice of safety and the prevention of accidents shall be the responsibility of all members of the District Attorney's Office. If you are injured on the job, please report the injuries immediately to your supervisor.

TIMECARDS:

The District Attorney's Office is required to record and maintain the number of volunteer hours worked. Your supervisor will provide you with the appropriate form to complete so that your total hours worked may be submitted on a monthly basis to your supervisor. The hours will then be forwarded to the program manager after the last working day of the month. The District Attorney reserves the right to terminate your volunteer work without cause.

COUNTY OF SAN BERNARDINO
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CONFIDENTIALITY & WORK ETHICS AGREEMENT (Page 2)

WORK ETHICS:

As a volunteer at the District Attorney's Office, you are expected to report to work in a timely manner and call in promptly to the appropriate supervisor when you are not able to report to work. You are to check in with your supervisor for daily work assignments, unless otherwise instructed. Work assignments may be interrupted and you may be given a new assignment when a priority task needs to be completed. Work assignments are expected to be completed in a timely manner. Report any concerns to the appropriate supervisor.

APPEARANCE & BEHAVIOR:

Clean business casual clothing and comfortable shoes are permitted, unless going to court or instructed otherwise. If you will be making a court appearance, you must adhere to the San Bernardino County District Attorney dress code. Leave assigned work areas clean before leaving for the day. Treat others professionally and respectfully.

I have read this agreement. I understand and agree to abide by all terms listed above.

Volunteer/Student Intern Name (Print)

Date

Volunteer/Student Intern Name (Signature)

Volunteer/Student Intern Coordinator Name (Print and Sign)

Date

Thank you for your interest in the San Bernardino County District Attorney's Office. With the effort of dedicated volunteers like you, our office will continue to enjoy its image of public trust and professionalism!